

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: UNDER THE COUNTER WATER TREATMENT  
SYSTEM

Attorney Docket Number:: 430117.413C1

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 9

Small Entity?:: No

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Greg  
Middle Name:: K.  
Family Name:: Justice  
Name Suffix::  
City of Residence:: Portland  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of mailing address:: 335 SE 32nd Ave.  
City of mailing address:: Portland  
State or Province of mailing address:: OR  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 97214

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Scott  
Middle Name:: A.  
Family Name:: Schorzman  
Name Suffix::  
City of Residence:: Kenmore  
State or Province of Residence:: WA  
Country of Residence:: US  
Street of mailing address:: 18115 62nd Ave. NE  
City of mailing address:: Kenmore  
State or Province of mailing address:: WA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 98028

**Third Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: J.  
Family Name:: Orolin  
Name Suffix::  
City of Residence:: West Linn  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of mailing address:: 20705 SW Willamette Dr.  
City of mailing address:: West Linn  
State or Province of mailing address:: OR  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 97068

**Fourth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Troy  
Middle Name:: T. C.  
Family Name:: Johnson  
Name Suffix::  
City of Residence:: Portland  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of mailing address:: 111 S.W. Harrison St., Apt. 19B  
City of mailing address:: Portland  
State or Province of mailing address:: OR  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 97201

**Fifth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Vaughn  
Middle Name:: A.  
Family Name:: Sucevich  
Name Suffix::  
City of Residence:: West Linn  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of mailing address:: 3400 SW Riverknoll Way  
City of mailing address:: West Linn  
State or Province of mailing address:: OR  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 97068

**Sixth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Aaron  
Middle Name:: R.  
Family Name:: Johnson  
Name Suffix::  
City of Residence:: Hillsboro  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of mailing address:: 29628 NW Evergreen Rd.  
City of mailing address:: Hillsboro  
State or Province of mailing address:: OR  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 97124

**Seventh Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Kit  
Middle Name:: G.  
Family Name:: Baldwin  
Name Suffix::  
City of Residence:: West Linn  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of mailing address:: 21880 SW Johnson Rd.  
City of mailing address:: West Linn  
State or Province of mailing address:: OR  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 97068

**Correspondence Information**

Correspondence Customer Number :: **00500**

**Representative Information**

Representative Customer Number::		<b>00500</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-Part of	09/637,955	08/11/00

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

**Assignee Information**

Assignee name::	H2O Technologies, Ltd.
Street of mailing address::	4011 S.E. International Way, Ste. 604
City of mailing address::	Milwaukie
State or Province of mailing address::	OR
Country of mailing address::	US
Postal or Zip Code of mailing address::	97267

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